## Military Department – State of California CALIFORNIA STATE MILITARY RESERVE APPLICATION FOR APPOINTMENT OR ENLISTMENT

Perso	nal Qualifica	tion Statemen	t							
1. NA	ME (Last, First, Middle) 2. SOCIAL			SECURITY NUMBER	DATE					
4 110	MAE ADDEC	20			LE DUCINIEGO ADDE	2500				
4. HOME ADRESS				5. BUSINESS ADDF	KESS					
A. TE	LEPHONE	( )			A. TELEPHONE (	)				
	B. E-mail: B. E-mail:									
6. DA	. DATE OF BIRTH (mm/dd/yy) 7. PLACE OF BIRTH (City, County, State) 8. CA DRIVER'S							R'S LICENS	SE NO.	
ο ΔΝΙ	ANSWER ITEMS "A" THROUGH "E" BY PLACING AN "X" IN THE PROPER COLUMN								Yes	No
	A. Are you a citizen of the United States?							110		
	If "No", give the country of which you are a citizen:									
pr	B. Are you now, or have you been, within the past ten years, a member of an organization that, to your present knowledge, seeks the overthrow of the constitutional form government of the United States by force or other unlawful means?									
	If your answer is "Yes", please explain on a separate sheet of paper indicating the dates of your membership, and the purpose of the organization while you were a member.									
ha th										
ur	D. Have you ever been convicted of an offense against the law or forfeited collateral, or are you now under charges for any offense against the law? (You may omit minor traffic violations where the fine was under \$50.00) **									
E. W	/hile on militar	ry duty, were you	ı ever c	convicted by a o	general court-martial? **					
		answer to "D" or late , charge, Co			a separate sheet of paper	r. Show	for each			
Militar	y Experienc	e								
10. D	o you have pr	ior military servi	ce? (C	heck all applica	able boxes)	Yes	No	Activ	e Reserve	
A. Ci										
Pı	rovide DD Fo	rm 214 or other a	approve	ed document to	substantiate service.					
11. H	ave you ever	been discharged	from t	he armed servi	ces under other tan hono	rable co	nditions?	Yes	. No	
If	If yes, provide details:									
Military Service (start with the most recent)										
F	FROM	TO		ORGANIZATI	ION AND COMPONENT		GRADE		OUTY ASSIG	NMENT

NAME on February Association (standard with the great great)										
Military Education (start with the most recent)  Course Title							Date Completed			
Professional Experience										
12. Please list your present position and work background for the pat 10 years. Also account for periods of unemployment.  May inquiry be made to your present employer regarding your character, qualifications and record of employment?  Yes No										
(A "No" answer will not affect consideration for appointment except for field grade positions.)										
Dates of en	Dates of employment (Month, Year)			Title or Position	Grade if Federal or Military Service					
Name of Immediate Supervisor Name of Employer (Firm, organization, etc.) and Address										
Telephone ( )										
Dates of en B.	B. Dates of employment (Month, Year)			xact Title or Position Grade if Federal or Military Service						
Name of Immedia	e Supervisor		Name of Employ	yer (Firm, organiza	ation, etc.) ar	nd Address				
Telephone ( )										
C. Dates of employment (Month, Year)			Exact Title or Position Grade if I			Federal or Military Service				
Name of Immediate Supervisor  Name of Employer (Firm, organization, etc.) and Address  Telephone ( )										
	nployment (Month	ı, Year)	Exact Title or Position Grade if F			Federal or Military Service				
Name of Immediate Supervisor  Name of Employer (Firm, organization, etc.) and Address										
Telephone ( )										
Civilian Education	n (Highest Lev	el only)				ı	Γ			
From To			School/College			Degree	Major			
ATTENTION – THIS STATEMENT MUST BE SIGNED  A false answer to any question in this statement maybe grounds for not appointing you, or for discharging you after your appointment, together with any additional sanctions allowed by the California Military and Veterans Code. All statements are subject to verification including a review of Department of Motor Vehicles records, police records (if warranted), and former employers.										
CERTIFICATION Signature (Sign in ink) Date signed										
I certify that all of the statements made in this Declaration are true, complete, and correct to the best of my knowledge and belief, and are made in good faith.										
FOR NATIONAL GUARD USE ONLY TDA Para and Line # State Order # Date							Date			
Unit of Assignment										

## Military Department – State of California CALIFORNIA STATE MILITARY RESERVE APPLICATION SUPPLEMENT -- STATEMENT OF PURPOSE

Please explain your purpose or reason for submitting an application to become a member of the California State Military Reserve:

1. How did you hear about the California State Military Reserve (CSMR)?
2. Do you have an individual sponsor? (If so, provide the individual's name and unit)
3. What unit do you want to join?
4. What career field do you want to pursue?
5. What rank to you feel you should receive upon joining the CSMR?
6. Have you read the CSMR Recruiting and Retention Information and fully understand the stated requirements for drill attendance, wearing and maintaining uniforms, and general military conduct?
CSMR Recruiting and Retention Information can be accessed at: http://www.calguard.ca.gov/casmr